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Bib Data Sheet

CONFIRMATION NO. 7165

|  |   |                               |   |                                     |
|--|---|-------------------------------|---|-------------------------------------|
| <b>SERIAL NUMBER</b><br>10/691,778   | <b>FILING OR 371(c) DATE</b><br>10/23/2003<br><b>RULE</b>   | <b>CLASS</b><br>492           | <b>GROUP ART UNIT</b><br>3726   | <b>ATTORNEY DOCKET NO.</b><br>10167 |
| <b>APPLICANTS</b><br>Jerry A. Pickering, Hilton, NY;<br>Theodora Miller, Rochester, NY;<br>Susan C. Baruch, Pittsford, NY;   |   |                               |   |                                     |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/425,647 11/13/2002 <i>OK MJ</i>   |   |                               |   |                                     |
| <b>** FOREIGN APPLICATIONS *****</b><br><i>None MJ</i>   |   |                               |   |                                     |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 02/20/2004</b>   |   |                               |   |                                     |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <i>Mark Bocchetti</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>NY | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>88           |
|  |   |                               |   | <b>INDEPENDENT CLAIMS</b><br>3      |
| <b>ADDRESS</b><br>MARK G. BOCCHETTI<br>EASTMAN KODAK COMPANY<br>343 STATE STREET<br>RODCHESTER, NY14650  |   |                               |   |                                     |
| <b>TITLE</b><br>Fuser member and fuser member surface layer  |   |                               |   |                                     |
| <b>FILING FEE RECEIVED</b><br>1994   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                     |